

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.W	68904	10/15/02
O.I.P.E. CLASSIFIER		8	10-2000
FORMALITY REVIEW	S.B	JC 895	10-15-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1-28-02
2	✓	✓	1-28-02
3	✓	✓	1-28-02
4	✓	✓	1-28-02
5	✓	✓	1-28-02
6	✓	✓	1-28-02
7	✓	✓	1-28-02
8	✓	✓	1-28-02
9	✓	✓	1-28-02
10	✓	✓	1-28-02
11	✓	✓	1-28-02
12	✓	✓	1-28-02
13	✓	✓	1-28-02
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If more than 150 claims or 10 actions  
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